Office Use	Only:	
Effective I	Date:	
New	Renew	

CGA MEMBERSHIP APPLICATION

Date:		Fees: In		, Family - \$ 60.00, Upgrade - \$ 30.0 Renewal Family Upgrade	
#	Name:			Birthdate:	
	Mail Address:				
	City:			State: Zip:	
	Telephone: ()			<u> </u>	
#	Member 2 Name:			Birthdate:	
#	Member 3 Name:			Birthdate:	
#	Member 4 Name:			Birthdate:	
#	Member 5 Name:			Birthdate:	
#	Member 6 Name:			Birthdate:	
#	Member 7 Name:			Birthdate:	
Fee: \$					
Method o	f Payment (check one):	Check #	Cash:	M/O	
1. 2.	nip in the California Gymkhana CGA Information Manual and Opportunity to sign up for CC Opportunity to vote for CGA p	CGA Rule Boo SA Year-end Awa	k. ards programs.	owing:	
to be caused I will be respon his custody, of cosponsoring may be incur- competition, be riding at y- will accept fur-	by any equine competing at any show on a sible for any injury that may be occass control and shall indemnify and hold horganization, clubs and arena owners, if a red by reason of any accident, injury, of In signing this release, please bear in mour own risk. CGA requests that it's meal responsibility for yourself for any injurnater 18 are REQUIRED to wear	for any article of an ioned to any person armless the Californ any, from and again or damage to person aind that Gymkhana is a mbers wear approved by which may result a helmet when rife PROVIDE MED	y kind or nature that may or animal or damage to a ia Gymkhana Association st all charges and expense or property caused by the sa contest of speed, that a safety helmets. If you commend that act when riding iding at a CGA sancti	the interpolation in the proposition of the property while on the grounds by any equine on it's officials and directors individually and colling of every kind and nature whatsoever arising out the element of danger involved and choose not to wear a safety helmet, then you as any compact of the property of the propert	ch competito owned, or in lectively and to of or which f any anima that you will n adult ride
I certify th	nat I have read, understand an	d agree to the a		(Parent or Guardian if under 18)	

Mail to: CGA, PO Box 2187, Manteca, CA 95336 Phone: 209-665-7977 Fax: 209-665-7978